FORM D

SEC Mail Mail Processing Section

JUL 3 | 2008

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1441	<i>(</i>
OMB APP	ROVAL
OMB Number:	3235-0076
Expires: Jul	v 31.2008
Estimated avera	age burden
hours per respo	nse 16.00

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Prefix	Serial
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Washington, DC	SECTION 4(6), AND/OR		DATE RECEIVED
105 UNIFORM			
=	and name has changed, and indicate change.)		. 174
Filing Under (Check box(es) that apply): Rule 5	04 Rule 505 Rule 506 Section 4(6)	ULOE	
Type of Filing:			
	A. BASIC IDENTIFICATION DATA		
1. Enter the information requested about the issuer			
Name of Issuer (check if this is an amendment and	name has changed, and indicate change.)		08056006
OptionVue Inc.	<u>.,</u>		
Address of Executive Offices	(Number and Street, City, State, Zip Code)		Number (Including Area Code)
950 Technology Way, Suite 125 Libe Address of Principal Business Operations	ertyville, Illinois 60048 (Number and Street, City, State, Zip Code)	847-816-66 Telephone	e Number (Including Area Code)
(if different from Executive Offices)	(Mannos and Basel, City, Bane, Elp Colley		, , <u>, , , , , , , , , , , , , , , , , </u>
Brief Description of Business		<u> </u>	
Options Analysis Software and Education Resou	rces		
Type of Business Organization			PROGENIE
	artnership, already formed Other () artnership, to be formed	please specify):	PROCESSED
	Month Year		AUG 0 6 2008
Actual or Estimated Date of Incorporation or Organization		mated	A00 0 0 2000
Jurisdiction of Incorporation or Organization: (Enter ty	vo-letter U.S. Postal Service abbreviation for State r Canada, FN for other foreign jurisdiction)		THOMSON REUTERS
GENERAL INSTRUCTIONS			
Federal:			
Who Must File: All issuers making an offering of securiti 77d(6).			
When To File: A notice must be filed no later than 15 of and Exchange Commission (SEC) on the earlier of the d which it is due, on the date it was mailed by United Sta	ate it is received by the SEC at the address given t	g. A notice is do below or, if reco	deemed filed with the U.S. Securities eived at that address after the date on
Where To File: U.S. Securities and Exchange Commiss	sion, 450 Fifth Street, N.W., Washington, D.C. 20	0549.	
Copies Required: Five (5) copies of this notice must be photocopies of the manually signed copy or bear typed of		ly signed. Any	copies not manually signed must be
Information Required: A new filing must contain all in thereto, the information requested in Part C, and any mat not be filed with the SEC.	formation requested. Amendments need only repo erial changes from the information previously supp	ort the name of slied in Parts A	the issuer and offering, any changes and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.			
State: This notice shall be used to indicate reliance on the Un ULOE and that have adopted this form. Issuers relyin are to be, or have been made. If a state requires the p accompany this form. This notice shall be filed in the this notice and must be completed.	g on ULOE must file a separate notice with the ayment of a fee as a precondition to the claim for appropriate states in accordance with state law	Securities Adn or the exemption	ninistrator in each state where sales on, a fee in the proper amount shall
Failure to file nation in the annuantists state	ATTENTION ————————————————————————————————————	vometion ^	Conversaly failure to file the
Failure to file notice in the appropriate state appropriate tederal notice will not result in a filling of a federal notice.	s will not result in a loss of the federal e I loss of an available state exemption unl	ess such exe	emption is predictated on the

Enter the information re	•	-			
•		uer has been organized w	-	-£ 109/	Fo along of equipure quities of the ice
					f a class of equity securities of the iss
			corporate general and man	aging partiters of	partitership issuers, and
Each general and n	nanaging partner o	f partnership issuers.			
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ıll Name (Last name first, i enneth Siegel	f individual)				•
usiness or Residence Addre 50 Technology Way, St	•	Street, City, State, Zip Co Libertyville, Illinois			
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
usiness or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
uli Name (Last name first,	if individual)		,		
usiness or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	 .	
heck Box(es) that Apply:	Promoter .	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first,	if individual)			·	
usiness or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
uli Name (Last name first,	if individual)	·		*	
usiness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)	-	
theck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first,	if individual)				
usiness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first,	if individual)				
Susiness or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
	/Ilea ble	all sheet or convend use	additional copies of this s	heet or mesercom	

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	7741	:	4 45			1 4			AL:65-:		• •	Yes	No ==
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												X
2.												\$ 200	,00.000,
-	2. What is the minimum investment that will be accepted from any murvidual?										Yes	No	
3.	-		p erm it joint										
4.	commis If a pers or states	sion or sim on to be lis s, list the na	ion requeste ilar remuner ted is an ass ume of the bu you may so	ration for s ociated pe roker or de	solicitation rson or age saler. If mo	of purchase nt of a brok erc than five	ers in conne er or deale (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	urities in tl EC and/or	he offering. with a state		
		Last name Tender by	first, if indi	vidual)									
		•	Address (N	umber and	Street, Ci	tv. State. 7	in Code)			-			
Na	me of Ass	sociated Br	oker or Dea	aler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or lintends	to Solicit	Purchasers			-			
	(Check	"All States	or check	individual	States)			***************************************		***************************************		□ All	States
	AL VZ MT	IN NE	AZ IA NV	AR KS NH	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	ll Name (Last name	first, if indi	vidual)									
Bų	siness or	Residence	Address (N	Number an	id Street, C	ity, State,	Zip Code)	 					
Na	me of Ass	sociated Bi	roker or Dea	aler	· · · · · · · · · · · · · · · · · · ·								
Sta			Listed Has						_				
	(Check	"All State:	s" or check	individual	States)	•••••	••••••	•••••				☐ Al	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fu	ll Name (Last name	first, if indi	vidual)			· · · · · · · · · · · · · · · · · · ·						·
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Na	me of As	sociated Bi	oker or Dea	aler	•								
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				······································		
	(Check	"All States	s" or check	individual	States)	•••••	***************************************		***************************************			☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERINGERICE NIMBER OF INVESTORS, EXPENSES AND USE OF PROTEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	e.	S
	Equity		
	✓ Common	•	3
	Convertible Securities (including warrants)	C	r
	Partnership Interests		
	Other (Specify)		
	Total	\$	\$ 323,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 325,000.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4. if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	····	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ 3,000.00
	Legal Fees		\$ 4,500.00
	Accounting Fees		s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	s
	Other Expenses (identify)	_	s
	Total	_	\$_7,500.00

	b. Enter the difference between the aggregand total expenses furnished in response to Paproceeds to the issuer."	art C — Question 4.a. This difference i	is the "adjusted gross		992,500.00
5.	Indicate below the amount of the adjusted geach of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in response	at for any purpose is not known, furn e total of the payments listed must equ	ish an estimate and		
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	•••••		\$. 🗆 \$
	Purchase of real estate	•••••••••••••••••••••••••••••••••••••••		s	. 🗆 \$
	Purchase, rental or leasing and installation	n of machinery	_		
	and equipment	••••••		\$	
	Construction or leasing of plant buildings	and facilities		s	s
	Acquisition of other businesses (including offering that may be used in exchange for issuer pursuant to a merger)	the assets or securities of another		2	□s
	Repayment of indebtedness		_		
	Working capital				
	Other (specify):				•
					. Ш ————
				\$. s
	Column Totals				
	Total Payments Listed (column totals add	ed)	· · · · · · · · · · · · · · · · · · ·	ss	92,500.00
17		D. WEDERAL'SIGNATU	REAL TOWN		
sig	e issuer has duly caused this notice to be signe nature constitutes an undertaking by the issu- information furnished by the issuer to any	ed by the undersigned duly authorized er to furnish to the U.S. Securities an	person. If this notice is d Exchange Commission	filed under Ru on, upon writte	ile 505, the followin
lss	uer (Print or Type)	Signature	Da	te	
Op	otionVue Inc.	•	7-	28-08	
	me of Signer (Pint or Type)	Title of Signer (Print or Ty	pe)		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

εγ'9' 33 83 - 20	E STATE SIGNATURE	基本	
1	1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature / less	Date 7-28-08	•
OptionVue Inc.	200 /2	7-20-00	
Name (Print or Type)	Title (Print or Type)		
Kenneth Siegel	ĊEO		·

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL			···							
AK				*						
AZ										
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ı	Intendation to non-a	i to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
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MT		·					,		
NE							м		
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1	to non-a	2 ito sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-ltem 2)			under Sta (if yes, explan- waiver	lification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No
WY									
PR									